UTILITY
PATENT APPLICATION
TRANSMITTAL
(Only for new nonprovisional applications under 37 CFR 1.53(b))

Attomey Docket No.	00684.002938.1	
First Named Inventor or Application Identifier		7 19
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Express Mail Label No.	EV 194362560 US	79, 19,

		Express Mail	Label No.	EV 194362560 U	IS	_ 9 🖠
APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents.		Mail Stop Patent Application Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450				10/
Fee Transmittal Form     (Submit an original, and a duplicate for fee p			7. CD-ROM or CD-R in duplicate, large table or Compu			nputer
2. Applicant claims small entity status. See 37 CFR 1.27.			Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)			sion
3. X Specification Total Page	ges 21		a C	omputer Readable	e Form (CRF)	
4. X Drawing(s) (35 USC 113) Total She	eets 6			ation Sequence Lis		
5. X Oath or Declaration Total Page	ges 2		ii p	paper		
a. Newly executed (original or c	ору)	<del></del>			g identity of above	copies
			ACCOM	PANYING APPLIC	ATION PARTS	
b. X Copy from a prior application (for continuation/divisional with		9.	Assignment I	Papers (cover sheet	& document(s))	
i. DELETION OF IN\ Signed Statement at		10.		(b) Statement is an assignee)	Power of	Attorney .
inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).		see 11.	English Translation Document (if applicable)			
6. X Application Data Sheet. See 37 CFR 1.76		12. X	Information Statement (	Disclosure IDS)/PTO-1449	Copies of Citations	
Date of Deposit ANUARY 29, 200	e of Deposit ANUARY 29, 2004		Preliminary	Amendment		
I hereby certify that this paper is being deposited with Service "Express Mail Post Office to Addressee: servi on the date indicated above and is addressed to the C	ce under 37 C.F.R. § commissioner of Pate	1.10   14. X		eipt Postcard (MPI specifically itemize		
SHARON N. FENNESSY	arks, P.O. Box 1450, Alexandria, VA 22313-1450 ARON し、FENNESSU		15. Certified Copy of Priority Document(s) (if foreign priority is claimed)			
(Typed or printed name of person mailing	paper or fee)	16. X	Other: Clain	m To Priority		
Harm U Fenne 385						
(Signature of person mailing pager or fee)		<del></del>				
17. If a CONTINUING APPLICATION, check appropriate box and supply the requisite information:						
X Continuation Divisional Continuation-in-part (CIP) of prior application No. 09/449,968, filed November 26, 1999  Prior application information: Examiner D. Tran Group/Art Unit: 2624						
For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 5b, is considered a part of the disclosure of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.						
	18. CORRE	SPONDENCE ADD	RESS			
X Customer Number or Bar Code Label (Insert Customer No. or Attach bar code label here) or Correspondence address below			wol:			
NAME						
1						
Address	Address					
City	State			Zip Code	-	
Country	Telephone			Fax	I	

CLAIMS	(1) FOR	(2) NUMBER FILED	(3) NUMBER EXTRA	(4) RATE	(5) CALCUL	ATIONS
	TOTAL CLAIMS (37 CFR 1.16(c))	7 -20 =	0	X \$ 18.00 =	\$	0.00
- · · · · · · · · · · · · · · · · · · ·	INDEPENDENT CLAIMS (37 CFR 1.16(b))	5 -3 =	2	X \$ 86.00 =	\$	176.00
	MULTIPLE DEPENDENT CLAIMS (if applicable) (37 CFR 1.16(d)) \$290.00 =			\$290.00 =	\$	0.00
<del></del>				BASIC FEE (37 CFR 1.16(a))	\$	770.00
			Total of	above Calculations =	\$	946.0
	Reduction by	50% for filing by small en	tity (Note 37 CFR 1.9, 1	.27, 1.28).		
	•			TOTAL =	\$	946.0
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT REQUIRED					
NAME	Michael K. O'Neill, Reg. No. 32,622				
SIGNATURE	relicial Krihell				
DATE	January 29, 2004				

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